

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

JAMES B. TRIPLETT
TRIPLETT & FLEMING
25 CAMP HILL DRIVE
OXFORD, MA 01540



9590 9402 5005 9063 2157 56

2. Article Number (Transfer from service label)

7019 0140 0000 1010 8479

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

James B. Triplett

☐ Agent☐ Addressee

B. Received by (Printed Name)

James Triplett

C. Date of Delivery

3/5/21

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Registered Mail☐ Registered Mail Restricted Delivery☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

USPS TRACKING#



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

9590 9402 5005 9063 2157 56

United States
Postal Service

FILED
IN CLERKS OFFICE

2021 MAR -9 AM 10:49

box*

U.S. DISTRICT COURT
DISTRICT OF MASS.

United States District Court
Office of the Clerk
595 Main Street, Room 502
Worcester, MA 01608

SCREENED
USMS

18-CV-40026-DHH

